PATENT APPLICATION FEE DETERMINATION RECORD Effective January 1, 2003



		CLAIMS A	S FILED	- PART	}		,	SMALL E	NTITY		OTHER	THAN	
_			(Column 1)		(Column 2)			TYPE		OR	OTHER THAN SMALL ENTITY		
TOTAL CLAIMS			23					RATE	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUME	NUMBER EXTRA		BASIC FEE	375.00	OR	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS			27 minus 20=		. 2			X\$ 9≈		OR	X\$18=	26	
INDEPENDENT CLAIMS			거 minus 3 =		•			X42=	 -		X84=	36	
MULTIPLE DEPENDENT CLAIM PRESENT								7,12-	_	OR	XOG	04	
*	f the difference		+140=		OR	+280=							
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	1.70	
7	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMALL ENTITY			OTHER THAN SMALL ENTITY		
AMENDMENT A		CLAIMS REMAINING		HIGH	EST	PRESENT	1		ADDI-	OR		ADDI-	
	• **	AFTER AMENDMENT		PREVIO	USLY	EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	. 23	Minus	2	2	= /	lt	X\$ 9=		OR	X\$18=	18,00/	
	Independent	. 4	Minus	***	4		 	X42=			X84=	1479	
⋖	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDENT	CLAIM			745=		OR	A04=	_/_	
								+140=		OR	+280=		
10/22/4 (Column 1) (Column 2) (Column 2)								TOTAL DDIT, FEE		OR	TOTAL ADDIT. FEE	18,W	
_/	10/20/	(Column 1)		(Colum		(Column 3)				_		1	
AMENDMENT B	,	REMAINING AFTER		NUME	ER	PRESENT	lΓ	RATE	ADDI-		5.75	ADDI-	
	is .	AMENOMENT		PREVIO PAID F		EXTRA		HAIE	TIONAL FEE		RATE	TIONAL FEE	
	Total	. 23	Minus	<u>~</u> 2.	3	•	1	X\$ 9=		OR	X\$18=		
	Independent	. 4	Minus	**** 4	/ .			X42=		OR	X84=	\neg	
-	FIRST PRESENTATION OF MULTIPLE DEPENDENT				CLAIM		 -	140		ا ^{من}		-A	
							L	+140=		OR	+280≈	\angle	
	•						A	DOIT. FEE		OR ,	TOTAL DOIT, FEE		
		(Column 1)		(Colum		(Column 3)					ľ	1	
AMENDMENT C	10213 V & 2	CLAIMS REMAINING		HIGHE NUMB		PRESENT	Γ		ADDI-	ſ		ADDI-	
	PRINCE AND A	AFTER AMENDMENT		PREVIOU PAID F	USLY	EXTRA			TIONAL		RATE	TIONAL	
	Total	•	Minus	44 A4		=	-	V2.0	FEE	ŀ	\\\	FEE	
	Independent	•	Minus	***			F	X\$ 9=		OR	X\$18=		
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						L	X42=		DA	X84=		
+140=											+280=		
••	If the "Highest Nun	nn 1 is less than the nber Previously Pai	id For IN THIS	S SPACE is i	lace than	20 color *20 *	L.	TOTAL		L DR.	TOTAL		
	i- 'ne "Highest Nur	mber Previously Pa	id For IN THE	S SPACE is	less than	3 enter "3"		OOIT. FEE		A	DOIT. FEE L		
	···· ingressiven	ber Previously Paid	rior (locator	= meheuder	ujis the l	nignest number	found	in the appr	opriate box	in colu	mn 1.	1	
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